



CONNECTION CARD



1. ADULT/PARENT INFORMATION

FULL NAME(S): _____

PRIMARY PHONE NUMBER: _____ DATE: _____

EMAIL ADDRESS: _____

STREET ADDRESS: _____

CITY _____ STATE _____ ZIP _____

I ATTEND ANOTHER CHURCH: YES | NO FIRST VISIT TO CARMEL: YES | NO

2. OPTIONAL INFO

CELL NUMBER: _____ WORK: _____

ADD'L EMAIL: _____

3. FOLLOW UP

I'D LIKE SOMEONE TO FOLLOW UP WITH ME I'M NEW TO CHARLOTTE

I'D LIKE INFO (CIRCLE): BEING A CHRISTIAN | MEMBERSHIP | BAPTISM | EVENTS

I WANT TO CONNECT: DISCIPLESHIP COMMUNITIES | A PASTOR | SERVING OPPORTUNITIES
ANY PRAYER REQUESTS OR QUESTIONS?

To talk to someone today, visit the **nextstep** area near the welcome desk in the church lobby.



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Be sure to complete
Section 1 first!



4. CHILD INFORMATION (PARENT INFO ON FRONT)

CHILD NAME: _____ GRADE: _____

FIRST VISIT TO CARMELKIDZ: YES | NO HOUR: 9:30 | 11:00

SCHOOL _____ GENDER: MALE | FEMALE

FRIEND YOU CAME WITH: _____

ALLERGIES/HEALTH CONCERNS: _____

LOCATION OF PARENT: WORSHIP CENTER | DC _____

5. SIBLING INFORMATION

DO YOU HAVE SIBLINGS IN GRADES 1-6 VISITING CARMEL TODAY : YES | NO

SIBLING NAME: _____ GRADE: _____

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ALLERGIES/HEALTH CONCERNS: _____

6. SPECIAL NOTES



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